

ATTORNEY DOCKET NO. CS1055#SP

COMBINED DECLARATION AND POWER OF ATTORNEY

FOR PATENT APPLICATION

As a below named inventor, I hereby declare that: my residence post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or a joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: *POWERED OSCILLATING HAND TOOL the specification of which is attached hereto unless one of the following boxes below is checked:

	The Specification was	as filed on April 23, 19	999, was assigned Serial No.	;	and was amended	
	was filed as PCT in amended under PC	iternational application T Article 19 on	n number (if applicable).	on	and was	
includir			understand the contents of the nent referred to above.	e above idei	ntified specification,	
accorda		duty to disclose infornode of Federal Regula	nation which is material to the extions, §1.56.	xamination o	of this application in	
or our in sale in patente foreign than twinterior	my or our invention to have the United States of a decided or made the subject to the United States are levely months prior to the been filed in a decided on has been filed in a decided on the subject to the United States are levely months or the subject to the united in a decided on the subject to the su	hereof, or patented one year properthan one year properties and one than or ct of an inventor's cere of America on an apporthis application, and	ame was ever known or used in described in any printed publication to this application, that the same year prior to this application, tificate issued before the date of lication filed by me or my legal rule that no application for patent the United States of America plows:	cation in any ame was not that the inverted this application or inventor!	t in public use or on ention has not been ation in any country es or assigns more s certificate on this	
applica		eign priority benefits eventor's certificate lis	under Title 35, United State ted below:	s Code, §1	119 of any foreign	
Prior Foreign Application(s)				Priority Claimed		
980903 Numbe		U.K. (Country)	04/29/98 (Month/Day/Year Filed)	X Yes	No	
Numbe	r)	(Country)	(Month/Day/Year Filed)	Ves	No	

All Foreign Applications, if any, for	any Patent or In	nventor's Certificate	Filed More Tha	an 12 Months F	Prior To The
Filing Date of This Application:	•				

Country	Application No.	Date of Filing
listed below and, insofar as the United States application in the acknowledge the duty to discharge the duty the duty to discharge the duty the d	he subject matter of each of the he he manner provided by the first lose material information as defi	ites Code, §120 of any United States application(sclaims of this application is not disclosed in the prior paragraph of Title 35, United States Code, §112, ined in Title 37, Code of Federal Regulations, §1.56 in and the national or PCT international filing date or
(Application No.)	(Filing Date)	(Status-Patent, Pending, Abandoned)
(Application No.) (Filing Date		(Status-Patent, Pending, Abandoned)

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting, patent based on instructions received from the entity who first provides said attorneys with a written notice to the contrary:

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Bruce S. Shapiro - TW199

Patent Department

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity or the application or any patent issued thereon.

GIVEN NAME	FAMILY NAME INVENTOR'S SIGNATURE	DATE			
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